

Midwifery Working Group

Friday, June 27, 2025 | 9:00-10:00am

Meeting Minutes

Members present: Lucinda Canty, Dante Costa, SciHonor Devotion, Sera Gadbois, Carolyn Greenfield, Dawn Havener, Daileann Hemmings, Richard Jennings, Shayna LaFlam, Priya Morganstern, Gengi Proteau.

Members absent: Kara Crawford, Christy D'Aquila, Camille Grant, Sam Haun, Christina Mukon, Selina Osei, Amy Romano, Kim Sandor, Michelle Telfer, Kathrine Villeda, Fatmata Williams.

Introduction

- Sera Gadbois called the meeting to order at 9:03am.
- Dawn Havener motioned to move the approval of the May 23 minutes until the next meeting, Daileann Hemmings seconded.

Kate Baker Presentation: Billing, Reimbursement, and Access to Homebirth and Quality Individualized Care

- Gengi Proteau introduced Kate Baker, a billing expert for midwifery practices, both with homebirth and at birthing centers. Kate owns Hamilton Billing, a small reimbursement company for midwives, with the goal of supporting midwives and helping patients afford the care. Kate is based in New York state and has been negotiating contracts with insurers for midwives since 2007.
- The group asked Kate about topics such as the challenges securing adequate reimbursement for midwifery services, the idea of mandating coverage for midwifery, the wide scope of services that midwives provide compared with the fees charged at a hospital, and the overall maternal health outcomes of midwifery.
- Kate is putting together a comparative chart of what a midwife does for a family, and how this compares to the services that a patient pays for in a hospital setting. When she is finished, she will distribute with the group.
- Following Kate's presentation and discussion, the group spoke about the need for more education about the full wraparound care midwives actually provide, as the value, quality, and outcomes of midwives is not widely recognized.
- The group also discussed how the midwifery model of care may or may not fit into the current healthcare landscape.

Continued Discussion: Education and Reimbursement

- Lucinda revisited some of the themes of discussion started last meeting on access and equity – not specific to reimbursement.

- Attending a homebirth was life changing for Lucinda. It gave her a new perspective on system, safety of patient and of midwife in contrast to hospital setting.
- Priya spoke on midwifery exceptionalism, saying it is still a healthcare practice, and she raised concern about families who can't otherwise access the care. She spoke about the losses versus the gains of regulation.
- The group discussed coming up with a new model of care in Connecticut, especially since the state does not have a good example to look to, as many peer states rushed or had pressure to develop regulations.
- Homebirth midwives in the state do not have the capacity to scale up delivery to 30% of the babies born in Connecticut.
- The group discussed midwifery and homebirth "fitting into" current system vs changing the entire maternity care system.
- Right now, the status quo is community care which is dependent on the individual midwife offering things like sliding scale fees for families with fewer resources.
 - Low resourced families are more work, which midwives currently offer for free.

Closing

- DPH will email a poll regarding availability for summer or desire to pick up in September.
- The meeting adjourned at 10:07am.